## FORM C

## SUMMARY OF REGISTRATION STATEMENT

	Filed with the Insurance Department of the State of	
	By Name of Registrant	
	On Behalf of Following Insurance Companies	
Name	Address	
	Date: , 20	
	Title, Address and telephone number of Individual to Whom Notices and Corresponde ing This Statement Should Be Addressed:	nce

Furnish a brief description of all items in the current annual registration statement which represent changes from the prior year's annual registration statement. The description shall be in a manner as to permit the proper evaluation thereof by the Commissioner, and shall include specific references to Item numbers in the annual registration statement and to the terms contained therein.

Changes occurring under Item 2 of Form B insofar as changes in the percentage of each class of voting securities held by each affiliate is concerned, need only be included where such changes are ones which result in ownership or holdings of 10% or more of voting securities, loss or transfer of control, or acquisition or loss of partnership interest.

Changes occurring under Item 4 of Form B need only be included where an individual is, for the first time, made a director or executive officer of the ultimate controlling person; a director or executive officer terminates his or her responsibilities with the ultimate controlling person; or in the event an individual is named president of the ultimate controlling person.

If a transaction disclosed on the prior year's annual registration statement has been changed, the nature of such change shall be included. If a transaction disclosed on the prior year's annual registration statement has been effectuated, furnish the mode of completion and any flow of funds between affiliates resulting from the transaction.

The insurer shall furnish a statement that transactions entered into since the filing of the prior year's annual registration statement are not part of a plan or series of like transactions whose purpose it is to avoid statutory threshold amounts and the review that might otherwise occur.

## SIGNATURE AND CERTIFICATION

•	and State of	•	signed on its behalf of the City
	20	on the	uuj 01
(CEAL)			
(SEAL)			Name of Applicant
		BY	
			(Name)
			(Title)
		Attest:	gnature of Officer)
		(Si <sub>§</sub>	gnature of Officer)
			(Title)
registration state that (s)he is the _ is authorized to e with such instrur	rsigned deposes and says the ment dated of s  (Title of Officer) execute and file such instructions.	, 20, for and uch company and that ment. Deponent further of, and that the facts the	uted the attached annual on behalf of; (Name of Applicant) such company and that (s)he er says that (s)he is familiar herein set forth are true to the
		(Signat	ure)
		(Type o	or print name beneath)
		(Title)	